

ALABAMA BOARD OF EXAMINERS IN MARRIAGE AND FAMILY THERAPY

P.O. Box 240066
Montgomery, AL 36124-0066
Phone: 334/215-7233
FAX: 334/215-7231
Website: www.mft.state.al.us

APPLICATION FOR RENEWAL OF LMFT LICENSE
FOR LICENSES EXPIRING ON DECEMBER 31, 2006

Official Notice of License Expiration in accordance with Sections 34-17-A-13 The Code of Alabama (1975) has been mailed to all licensees expiring on December 31, 2006 on September 29, 2006. On-line renewal available on this site (from opening page). Use this form only for completing manual renewals. For Manual Renewals, a CEU Reporting Form is also required and is available on this site.

Name: _____

License #: _____

Address: _____

City: _____ ST _____ Zip: _____

Instructions: In order to renew your license, please submit the following:

- Completed Application Renewal Form;
- \$200 License Renewal Fee (personal and company checks made payable to ABEMFT are accepted); (Supervisor Renewal Fees if applicable – see below)
- Completed Continuing Education Reporting Form.

Please send your completed renewal to: **ABEMFT**
P.O. Box 240066
Montgomery, AL 36124-0066.

A CEU Reporting Form can be found on this web site for your convenience. If your license renewal is received by the deadline of December 31, 2006, you will have a full two year license expiring on December 31, 2008. If your license renewal is received after the deadline, it may be renewed late until March 1, 2007 with a \$100.00 penalty in addition to the \$200.00 License Renewal Fee. Approved Supervisor Designations are required to renew by these same dates. In addition to the \$200 LMFT License Fee, the Supervisor Renewal Fee is \$50; and the Supervisor of Supervision Renewal Fee is \$50. Supervisors are required to submit an additional 5 CEU's in Supervision. For further information on renewals and continuing education requirements, please refer to the Rules and Regulations located on this site. In order to help ABEMFT better serve you in expediting your license renewal, please submit all renewal information to the Board Office at one time. Thank you.

Please complete the following:

DURING THE PREVIOUS 24 MONTHS:

- Have you been denied a Marriage and Family Therapy License in any state or jurisdiction? ☐ Yes ☐ No
- Have you had a Marriage and Family Therapy License suspended, revoked, surrendered or have you been disciplined by the Licensing authorities in any state or jurisdiction? ☐ Yes ☐ No
- Have you been convicted of any criminal offense or is there any criminal charge now pending against you? ☐ Yes ☐ No
- If you answered yes to any of the above questions, documentation is: ☐ Attached to this form ☐ On file in the Board Office

I hereby attest that the above information contained herein is true to the best of my knowledge and belief.

Signature: _____

Date: _____

- Also Enclosed:
- ☐ \$200.00 License Renewal Fee
 - ☐ Completed CEU Reporting Form with Supporting Documentation (40 hours required with a minimum of 10 hours in Clinical MFT and 3 hours in Professional Ethics)
 - ☐ For Supervisors: \$50.00 Renewal Fee for Supervisor Status
 - ☐ For Supervisors of Supervision: \$50 Renewal Fee for Supervisor of Supervision Status
 - ☐ \$100.00 Late Fee (If renewing after December 31, 2006 and before March 1, 2007)